#### Case 08-03975 Doc 1

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Filed 02/21/08 Entered 02/21/08 15:02:33 Desc Main Document Page 1 of 38 United States Bankruptcy Court Northern District of Illinois

| I  | N RE:                                                                                                                           | Case No                                                                                                                                                                                                                                                                     |
|----|---------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| R  | uby, Brian                                                                                                                      | Chapter 7                                                                                                                                                                                                                                                                   |
|    | De                                                                                                                              | btor(s)                                                                                                                                                                                                                                                                     |
|    | DISCLOSURE (                                                                                                                    | OF COMPENSATION OF ATTORNEY FOR DEBTOR                                                                                                                                                                                                                                      |
| 1. |                                                                                                                                 | ale 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within otcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation follows:                          |
|    | For legal services, I have agreed to accept                                                                                     | ······\$                                                                                                                                                                                                                                                                    |
|    | Prior to the filing of this statement I have received                                                                           | \$                                                                                                                                                                                                                                                                          |
|    | Balance Due                                                                                                                     | \$                                                                                                                                                                                                                                                                          |
| 2. | The source of the compensation paid to me was:                                                                                  | Debtor Other (specify):                                                                                                                                                                                                                                                     |
| 3. | The source of compensation to be paid to me is:                                                                                 | Debtor Other (specify):                                                                                                                                                                                                                                                     |
| 4. | ☑ I have not agreed to share the above-disclosed                                                                                | compensation with any other person unless they are members and associates of my law firm.                                                                                                                                                                                   |
|    | I have agreed to share the above-disclosed cortogether with a list of the names of the people                                   | mpensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, sharing in the compensation, is attached.                                                                                                                    |
| 5. | In return for the above-disclosed fee, I have agreed                                                                            | to render legal service for all aspects of the bankruptcy case, including:                                                                                                                                                                                                  |
|    | <ul><li>b. Preparation and filing of any petition, schedule</li><li>c. Representation of the debtor at the meeting of</li></ul> | d rendering advice to the debtor in determining whether to file a petition in bankruptcy; es, statement of affairs and plan which may be required; creditors and confirmation hearing, and any adjourned hearings thereof; exedings and other contested bankruptcy matters; |
| 6. | By agreement with the debtor(s), the above disclose                                                                             | ed fee does not include the following services:                                                                                                                                                                                                                             |
|    |                                                                                                                                 | CERTIFICATION                                                                                                                                                                                                                                                               |
|    |                                                                                                                                 | any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy                                                                                                                                                                       |
|    | proceeding.                                                                                                                     |                                                                                                                                                                                                                                                                             |
|    | February 10, 2008  Date                                                                                                         | /s/ Martin Tiersky Signature of Attorney                                                                                                                                                                                                                                    |

**Martin Tiersky** 

Name of Law Firm

## NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### <u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in instalments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them,

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using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

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A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Printed Name and title, if any, of Bankruptcy Petition Preparer Address:                                                                        | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of |
|-------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| X                                                                                                                                               | the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)                                                                                                               |
| Signature of Bankruptcy Petition Preparer of officer, principal, responsible person, or partner whose Social Security number is provided above. |                                                                                                                                                                                 |
| Certificate of the Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.                                         |                                                                                                                                                                                 |

| Ruby, Brian                  | X /s/ Brian Ruby                   | 2/10/2008 |
|------------------------------|------------------------------------|-----------|
| Printed Name(s) of Debtor(s) | Signature of Debtor                | Date      |
| Case No. (if known)          | X                                  |           |
|                              | Signature of Joint Debtor (if any) | Date      |

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Entered 02/21/08 15:02:33 Desc Main Case 08-03975 Doc 1 Filed 02/21/08 Document Page 4 of 38 B22A (Official Form 22A) (Chapter 7) (01/08) According to the calculations required by this statement: ☐ The presumption arises In re: Ruby, Brian The presumption does not arise Debtor(s) (Check the box as directed in Parts I, III, and VI of this statement.) Case Number: \_ (If known)

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|    | Part I. EXCLUSION FOR DISABLED VI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ETERANS AND NON-CONSUM                   | ER DEBTOR                      | S              |  |  |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|--------------------------------|----------------|--|--|
| 1A | If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                          |                                |                |  |  |
|    | □ Veteran's Declaration. By checking this box, I dec in 38 U.S.C. § 3741(1)) whose indebtedness occurred 1 10 U.S.C. § 101(d)(1)) or while I was performing a hor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | primarily during a period in which I wa  | as on active duty              | (as defined in |  |  |
| 1B | If your debts are not primarily consumer debts, check t complete any of the remaining parts of this statement.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | he box below and complete the verific    | ation in Part VIII             | . Do not       |  |  |
|    | ☐ <b>Declaration of non-consumer debts.</b> By checking                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | this box, I declare that my debts are no | t primarily consu              | ımer debts.    |  |  |
|    | Part II. CALCULATION OF MONTH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | LY INCOME FOR § 707(b)(7) E              | XCLUSION                       |                |  |  |
|    | Marital/filing status. Check the box that applies and o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | -                                        | statement as dir               | ected.         |  |  |
|    | a. Unmarried. Complete only Column A ("Debtor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |                                |                |  |  |
|    | b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."  Complete only Column A ("Debtor's Income") for Lines 3-11.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |                                |                |  |  |
| 2  | c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                          |                                |                |  |  |
|    | d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                          |                                |                |  |  |
|    | All figures must reflect average monthly income receive the six calendar months prior to filing the bankruptcy comonth before the filing. If the amount of monthly incommust divide the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six, and enter the results of the six-month total by six- | Column A Debtor's Income                 | Column B<br>Spouse's<br>Income |                |  |  |
| 3  | Gross wages, salary, tips, bonuses, overtime, commi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                          | \$ 462.72                      | \$             |  |  |
| 4  | Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |                                |                |  |  |
|    | a. Gross receipts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$                                       |                                |                |  |  |
|    | b. Ordinary and necessary business expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$                                       |                                |                |  |  |
|    | c. Business income                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Subtract Line b from Line a              | \$                             | \$             |  |  |

B22A (Official Form 22A) (Chapter 7) (01/08)

| (  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ··· - ···· · · · · · · · · · · · · · ·                                                                          |                                 |                            |                  |                        |          |              |                 |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------|------------------|------------------------|----------|--------------|-----------------|
|    | Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.                                                                                                                                                                                                                                        |                                                                                                                 |                                 |                            |                  | s than zero. <b>Do</b> |          |              |                 |
| 5  | a.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Gross receipts                                                                                                  |                                 | \$                         |                  |                        |          |              |                 |
|    | b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Ordinary and necessary operating e                                                                              | expenses                        | \$                         |                  |                        |          |              |                 |
|    | c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Rent and other real property incom                                                                              | ie                              | Subtract I                 | Line b fro       | m Line a               | \$       |              | \$              |
| 6  | Inte                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | rest, dividends, and royalties.                                                                                 |                                 |                            |                  |                        | \$       |              | \$              |
| 7  | Pens                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ion and retirement income.                                                                                      |                                 |                            |                  |                        | \$       |              | \$              |
| 8  | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.                                                                                                                                                                                                       |                                                                                                                 |                                 |                            |                  |                        |          | \$           |                 |
| 9  | How<br>was a<br>Colu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ever, if you contend that unemployment benefit under the Social Security A mn A or B, but instead state the amo | ent compensa<br>ct, do not list | tion receive<br>the amount | ed by you        | or your spouse         | 1        |              |                 |
|    | cla                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | employment compensation imed to be a benefit under the cial Security Act                                        | Debtor \$                       |                            | Spouse           | \$                     | \$       |              | \$              |
| 10 | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  a. \$ b. \$ |                                                                                                                 |                                 |                            |                  |                        |          |              |                 |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | al and enter on Line 10                                                                                         | 2 <b>505</b> (1 ) ( <b>5</b> )  | A 11T'                     | 2.1. 1           | 0: 01 4                | \$       |              | \$              |
| 11 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | total of Current Monthly Income for if Column B is completed, add Lines                                         |                                 |                            |                  |                        | \$       | 462.72       | \$              |
| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.                                                                                                                                                                                                                                                                                  |                                                                                                                 |                                 |                            |                  |                        | 462.72   |              |                 |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Part III. APF                                                                                                   | PLICATION                       | OF § 70'                   | 7(B)(7) <b>F</b> | EXCLUSION              |          |              |                 |
| 13 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ualized Current Monthly Income f<br>nd enter the result.                                                        | or § 707(b)(7                   | ). Multiply                | the amou         | nt from Line 12        | by the 1 |              | \$<br>5,552.64  |
| 14 | hous                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | licable median family income. Ente<br>ehold size. (This information is avail<br>ankruptcy court.)               |                                 |                            |                  |                        |          | k of         |                 |
|    | a. En                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ter debtor's state of residence: Illino                                                                         | is                              |                            | _ b. Ente        | r debtor's housel      | nold siz | ze: <b>1</b> | \$<br>43,436.00 |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | lication of Section 707(b)(7). Check                                                                            |                                 | •                          |                  |                        | 6 45     | D1           | 1               |
| 15 | <ul> <li>✓ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.</li> <li>☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.</li> </ul>                                                                                                                                 |                                                                                                                 |                                 |                            |                  |                        |          |              |                 |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Part IV. CALCULATI                                                                                                                                                                                                                          | ON OF CURE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | RENT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | MONTHLY                                                                                                                                                                       | INCOME FO                                                                                                                            | OR § 707(b)(2)                                            |    |
|------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----|
| 16         | Enter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | the amount from Line 12.                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               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                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                               |                                                                                                                                      |                                                           | \$ |
| 17         | Line 1 debtor payme debtor adjustr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | al adjustment. If you checked 1, Column B that was NOT parties dependents. Specify in the last of the spouse's tax liability is dependents) and the amountments on a separate page. If you                                                  | nid on a regular b<br>ines below the ba<br>or the spouse's s<br>t of income devot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | asis for<br>asis for<br>upport<br>ted to e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | the household<br>excluding the<br>of persons oth<br>ach purpose. I                                                                                                            | l expenses of the<br>Column B incor<br>er than the debte<br>f necessary, list<br>zero.                                               | e debtor or the<br>me (such as<br>or or the<br>additional |    |
|            | b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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|            | c.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        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                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                               |                                                                                                                                      |                                                           | \$ |
| 18         | Curre                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ent monthly income for § 707                                                                                                                                                                                                                | <b>(b)(2).</b> Subtract 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            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                                                                                                                                                                                                                                                                                                                                                               | from Line 16                                                                                                                                                                  | and enter the res                                                                                                                    | sult.                                                     | \$ |
|            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Part V. CAL Subpart A: Deduce                                                                                                                                                                                                               | CULATION C                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                               |                                                                                                                                      |                                                           |    |
| 19A        | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                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                                                                                                                                                     | \$                                                                                                                                                                            |                                                                                                                                      |                                                           |    |
| 19B        | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B. |                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                               |                                                                                                                                      |                                                           |    |
|            | Hou                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | sehold members under 65 ye                                                                                                                                                                                                                  | ars of age                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           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                                                                                                                                                                                                                                                                                                                                                               | sehold memb                                                                                                                                                                   | ers 65 years of                                                                                                                      | age or older                                              |    |
|            | a1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Allowance per member                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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                                                                                                                                                                                                                                                                                                                                                               | Allowance p                                                                                                                                                                   | er member                                                                                                                            |                                                           |    |
|            | b1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Number of members                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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                                                                                                                                                                                                                                                                                                                                                               | Number of r                                                                                                                                                                   | nembers                                                                                                                              |                                                           |    |
|            | c1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Subtotal                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      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                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                               |                                                                                                                                      |                                                           |    |
|            | Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     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| 20A        | and U                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | tilities Standards; non-mortgag                                                                                                                                                                                                             | ge expenses for th                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | age exp                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | cable county a                                                                                                                                                                | nd household si                                                                                                                      |                                                           | \$ |
|            | and Uninform  Local the IR inform the tot                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | tilities Standards; non-mortgag                                                                                                                                                                                                             | ge expenses for the bi.gov/ust/ or from tities; mortgage/re bi.gov/ust/ or from tyments for any definition of the bi.gov/ust/ or from tyments for any definition of the bi.gov/ust/ or from tyments for any definition of the bi.gov/ust/ or from tyments for any definition of the bi.gov/ust/ or from tyments for any definition of the bi.gov/ust/ or from the bi.gov/ust/ | age explicate application application the classical rent expense application and the classical rent expense application applic | penses. Enter to cable county a lerk of the ban pense. Enter, inse for your calerk of the ban ured by your h                                                                  | Ind household si<br>kruptcy court).<br>In Line a below,<br>ounty and family<br>kruptcy court); one, as stated in                     | the amount of vize (this enter on Line b n Line 42;       |    |
| 20A<br>20B | and Uninform  Local the IR inform the tot subtrace                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | tilities Standards; non-mortgagnation is available at <a href="www.usde">www.usde</a> <b>Standards: housing and util</b> S Housing and Utilities Standaration is available at <a href="www.usde">www.usde</a> al of the Average Monthly Pay | ge expenses for the bi.gov/ust/ or from tities; mortgage/reads; mortgage/rebi.gov/ust/ or from the result in Lin                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | age explies applied the classical rent experiment experiments are classical to the classical rent experiments.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | penses. Enter to cable county a derk of the ban pense. Enter, inse for your clerk of the ban ured by your hand to not enter                                                   | Ind household si<br>kruptcy court).<br>In Line a below,<br>ounty and family<br>kruptcy court); one, as stated in                     | the amount of vize (this enter on Line b n Line 42;       |    |
|            | and Uninform  Local the IR inform the tot subtrace a. b.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | tilities Standards; non-mortgag<br>nation is available at www.usde<br>Standards: housing and util<br>S Housing and Utilities Standa<br>nation is available at www.usde<br>al of the Average Monthly Pay<br>ct Line b from Line a and ente   | ge expenses for the bi.gov/ust/ or from ities; mortgage/reards; mortgage/rebi.gov/ust/ or from yments for any dear the result in Linual and ards; mortgage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | age explanation and age explanation and experiment expe | penses. Enter the cable county at lerk of the band pense. Enter, it is not enter to the band pense for your callerk of the band pense by your hand by your hand pense expense | and household si<br>kruptcy court).  In Line a below,<br>county and family<br>kruptcy court); and me, as stated in<br>an amount less | the amount of vize (this enter on Line b n Line 42;       |    |

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| 21  | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:                                                                                    |                          |    |  |  |  |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|----|--|--|--|
|     |                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                          | \$ |  |  |  |
|     | Local Standards: transportation; vehicle operation/public transportation examples allowance in this category regardless of whether you pay the expense and regardless of whether you use public transportation.                                                                                                                                                                                                                                       |                          |    |  |  |  |
|     | Check the number of vehicles for which you pay the operating expenses or for w expenses are included as a contribution to your household expenses in Line 8.                                                                                                                                                                                                                                                                                          | hich the operating       |    |  |  |  |
| 22A | $\square 0 \square 1 \square 2$ or more.                                                                                                                                                                                                                                                                                                                                                                                                              |                          |    |  |  |  |
|     | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk |                          |    |  |  |  |
|     | of the bankruptcy court.)  Local Standards: transportation; additional public transportation expense.                                                                                                                                                                                                                                                                                                                                                 | If you pay the operating | \$ |  |  |  |
|     | expenses for a vehicle and also use public transportation, and you contend that y                                                                                                                                                                                                                                                                                                                                                                     | ou are entitled to an    |    |  |  |  |
| 22B | additional deduction for your public transportation expenses, enter on Line 22B Transportation" amount from IRS Local Standards: Transportation. (This amount                                                                                                                                                                                                                                                                                         |                          |    |  |  |  |
|     | www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)                                                                                                                                                                                                                                                                                                                                                                                        | it is available at       | \$ |  |  |  |
|     | <b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)                                                                                                                                                                                                                        |                          |    |  |  |  |
|     | $\square$ 1 $\square$ 2 or more.                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |    |  |  |  |
| 23  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. <b>Do not enter an amount less than zero.</b> |                          |    |  |  |  |
|     | a. IRS Transportation Standards, Ownership Costs \$                                                                                                                                                                                                                                                                                                                                                                                                   |                          |    |  |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 \$                                                                                                                                                                                                                                                                                                                                                                   |                          |    |  |  |  |
|     | c. Net ownership/lease expense for Vehicle 1 Sub                                                                                                                                                                                                                                                                                                                                                                                                      | tract Line b from Line a | \$ |  |  |  |
|     | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b                                                           |                          |    |  |  |  |
| 24  | the total of the Average Monthly Payments for any debts secured by Vehicle 2, a subtract Line b from Line a and enter the result in Line 24. <b>Do not enter an amo</b>                                                                                                                                                                                                                                                                               |                          |    |  |  |  |
| 24  | a. IRS Transportation Standards, Ownership Costs, Second Car \$                                                                                                                                                                                                                                                                                                                                                                                       |                          |    |  |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 \$                                                                                                                                                                                                                                                                                                                                                                   |                          |    |  |  |  |
|     | c Net ownership/lease expense for Vehicle 2 Sub-                                                                                                                                                                                                                                                                                                                                                                                                      | tract Line b from Line a |    |  |  |  |

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| BZZA (                  | Official Form 22A) (Chapter 7) (01/08)                                                                                                                                                                                                                                                                                                                                                                                            |                                           |    |  |  |  |  |
|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----|--|--|--|--|
| 25                      | Other Necessary Expenses: taxes. Enter the total average mont federal, state, and local taxes, other than real estate and sales tax taxes, social security taxes, and Medicare taxes. Do not include                                                                                                                                                                                                                              | es, such as income taxes, self employment | \$ |  |  |  |  |
| 26                      | Other Necessary Expenses: involuntary deductions for employment payroll deductions that are required for your employment, such a and uniform costs. Do not include discretionary amounts, such                                                                                                                                                                                                                                    | as retirement contributions, union dues,  | \$ |  |  |  |  |
| 27                      | Other Necessary Expenses: life insurance. Enter total average for term life insurance for yourself. Do not include premiums f whole life or for any other form of insurance.                                                                                                                                                                                                                                                      |                                           | \$ |  |  |  |  |
| 28                      | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.                                                                                                                                          |                                           |    |  |  |  |  |
| 29                      | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.                                             |                                           |    |  |  |  |  |
| 30                      | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.                                                                                                                                                                                                               |                                           |    |  |  |  |  |
| 31                      | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.    |                                           |    |  |  |  |  |
| 32                      | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service— such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. |                                           |    |  |  |  |  |
| 33                      | Total Expenses Allowed under IRS Standards. Enter the total                                                                                                                                                                                                                                                                                                                                                                       | of Lines 19 through 32.                   | \$ |  |  |  |  |
|                         | Subpart B: Additional Expense De<br>Note: Do not include any expenses that                                                                                                                                                                                                                                                                                                                                                        |                                           |    |  |  |  |  |
|                         | Health Insurance, Disability Insurance, and Health Savings expenses in the categories set out in lines a-c below that are reas spouse, or your dependents.                                                                                                                                                                                                                                                                        |                                           |    |  |  |  |  |
|                         | a. Health Insurance                                                                                                                                                                                                                                                                                                                                                                                                               | \$                                        |    |  |  |  |  |
| 34                      | b. Disability Insurance                                                                                                                                                                                                                                                                                                                                                                                                           | \$                                        |    |  |  |  |  |
|                         | c. Health Savings Account                                                                                                                                                                                                                                                                                                                                                                                                         | \$                                        |    |  |  |  |  |
|                         | Total and enter on Line 34                                                                                                                                                                                                                                                                                                                                                                                                        |                                           | \$ |  |  |  |  |
|                         | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:                                                                                                                                                                                                                                                                                                         |                                           |    |  |  |  |  |
|                         | <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |    |  |  |  |  |
| 35                      | Continued contributions to the care of household or family monthly expenses that you will continue to pay for the reasonable elderly, chronically ill, or disabled member of your household or unable to pay for such expenses.                                                                                                                                                                                                   | e and necessary care and support of an    | \$ |  |  |  |  |
| 36                      | <b>Protection against family violence.</b> Enter the total average reast you actually incurred to maintain the safety of your family under Services Act or other applicable federal law. The nature of these confidential by the court.                                                                                                                                                                                           | the Family Violence Prevention and        | \$ |  |  |  |  |
| 111 111 111 111 111 111 |                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                           |    |  |  |  |  |

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| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.                                                                                                                                      |                                                                                                            |            |                                                                                                               |                       |            | \$ |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|------------|---------------------------------------------------------------------------------------------------------------|-----------------------|------------|----|
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.              |                                                                                                            |            |                                                                                                               |                       | \$         |    |
| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. |                                                                                                            |            |                                                                                                               |                       |            | \$ |
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).                                                                                                                                                                                                                                                                                                   |                                                                                                            |            |                                                                                                               |                       |            | \$ |
| 41 | Tota                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | l Additional Expense Deduction                                                                             | ns under   | § <b>707(b).</b> Enter the total                                                                              | al of Lines 34 thro   | ugh 40     | \$ |
|    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | S                                                                                                          | ubpart C   | : Deductions for Deb                                                                                          | t Payment             |            |    |
| 42 | Name of Creditor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                            |            |                                                                                                               |                       | \$         |    |
| 43 | Name of Creditor Property Securing the Debt Cur a. \$ b. \$ c. \$ \$                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                            |            | f your dependents, ust pay the the property. The session or ational entries on a 1/60th of the Cure Amount \$ | \$                    |            |    |
| 44 | such                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | nents on prepetition priority cl<br>as priority tax, child support and<br>ruptcy filing. Do not include cu | alimony of | claims, for which you v                                                                                       | were liable at the ti | me of your | \$ |

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| B22A ( | Official Form 22A) (Chapter 7) (01/08)                                                                                                                                                                                                                            | 1 age 10 01 00                                                                                               |  |  |  |  |
|--------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--|--|--|--|
|        | <b>Chapter 13 administrative expenses.</b> If you are eligible following chart, multiply the amount in line a by the administrative expense.                                                                                                                      |                                                                                                              |  |  |  |  |
|        | a. Projected average monthly chapter 13 plan pa                                                                                                                                                                                                                   | ayment. \$                                                                                                   |  |  |  |  |
| 45     | b. Current multiplier for your district as determine schedules issued by the Executive Office for Universely. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bacourt.)                    | United States                                                                                                |  |  |  |  |
|        | c. Average monthly administrative expense of chease                                                                                                                                                                                                               | Phapter 13 Total: Multiply Lines a and b \$                                                                  |  |  |  |  |
| 46     | Total Deductions for Debt Payment. Enter the total                                                                                                                                                                                                                | al of Lines 42 through 45.                                                                                   |  |  |  |  |
|        | Subpart D: Tot                                                                                                                                                                                                                                                    | tal Deductions from Income                                                                                   |  |  |  |  |
| 47     | Total of all deductions allowed under § 707(b)(2).                                                                                                                                                                                                                | ). Enter the total of Lines 33, 41, and 46.                                                                  |  |  |  |  |
|        | Part VI. DETERMINATION                                                                                                                                                                                                                                            | ION OF § 707(b)(2) PRESUMPTION                                                                               |  |  |  |  |
| 48     | Enter the amount from Line 18 (Current monthly                                                                                                                                                                                                                    | y income for § 707(b)(2))                                                                                    |  |  |  |  |
| 49     | Enter the amount from Line 47 (Total of all dedu                                                                                                                                                                                                                  | uctions allowed under § 707(b)(2)) \$                                                                        |  |  |  |  |
| 50     | Monthly disposable income under § 707(b)(2). Su                                                                                                                                                                                                                   | ubtract Line 49 from Line 48 and enter the result. \$                                                        |  |  |  |  |
| 51     | <b>60-month disposable income under § 707(b)(2).</b> Menter the result.                                                                                                                                                                                           | Multiply the amount in Line 50 by the number 60 and \$                                                       |  |  |  |  |
|        | <b>Initial presumption determination.</b> Check the appl                                                                                                                                                                                                          | plicable box and proceed as directed.                                                                        |  |  |  |  |
|        | ☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.                                    |                                                                                                              |  |  |  |  |
| 52     | ☐ The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. |                                                                                                              |  |  |  |  |
|        | ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (Lines 53 though 55).                                                                                                                                  |                                                                                                              |  |  |  |  |
| 53     | Enter the amount of your total non-priority unsec                                                                                                                                                                                                                 | ecured debt \$                                                                                               |  |  |  |  |
| 54     | <b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.                                                                                                                                                     |                                                                                                              |  |  |  |  |
|        | Secondary presumption determination. Check the                                                                                                                                                                                                                    | e applicable box and proceed as directed.                                                                    |  |  |  |  |
| 55     | The amount on Line 51 is less than the amount the top of page 1 of this statement, and complete                                                                                                                                                                   | <b>nt on Line 54.</b> Check the box for "The presumption does not arise" at e the verification in Part VIII. |  |  |  |  |
|        | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.                         |                                                                                                              |  |  |  |  |

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B22A (Official Form 22A) (Chapter 7) (01/08)

#### Part VII. ADDITIONAL EXPENSE CLAIMS

Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.

|    | Expense Description         | Monthly Amount |
|----|-----------------------------|----------------|
| a. |                             | \$             |
| b. |                             | \$             |
| c. |                             | \$             |
|    | Total: Add Lines a, b and c | \$             |

#### **Part VIII. VERIFICATION**

| I declare under penalty of | perjury that the information | n provided in this statem | ent is true and correc | ct. (If this a joint case, |
|----------------------------|------------------------------|---------------------------|------------------------|----------------------------|
| both debtors must sign.)   |                              |                           |                        |                            |

57

56

| Date: <b>February 10, 2008</b> | Signature: /s/ Brian Ruby |          |
|--------------------------------|---------------------------|----------|
|                                |                           | (Debtor) |
|                                |                           |          |

Date: \_\_\_\_\_ Signature: \_\_\_\_ (Joint Debtor, if any)

**United States Bankruptcy Court** 

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Desc Main

| Tax-Exempt Entity (Check box, if applicable.)   Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).  Filing Fee (Check one box)   Full Filing Fee attached   Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.   Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.   A plan is being filed with this petition   Acceptances of the plan were solicited prepetition from one or more classes creditors, in accordance with 11 U.S.C. § 1126(b).    THIS SPACE IS FOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Norther                                                                                                                                                                                                                                                                                                                                                                        | ois Voluntary Petition                                                                                                                                              |                                                                                                                                        |                              |                                                                                   |                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| (include married, maiden, and trade names):  (include state all):  |                                                                                                                                                                                                                                                                                                                                                                                | lle):                                                                                                                                                               | Name of Joint Debt                                                                                                                     | or (Spouse) (Last, First, M  | fiddle):                                                                          |                                                                                                                                                            |
| EIN (if more than one, state all):  Street Address of Debtor (No. & Street, City, State & Zip Code):  4568 Lindenwood Northbrook, IL  ZIPCODE  County of Residence or of the Principal Place of Business:  Cook  Mailing Address of Joint Debtor (if different from street address):  Mailing Address of Joint Debtor (if different from street address):  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address):  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address above):  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address above):  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address above):  ZIPCODE  Nature of Business (Check one box.)  Individual (includes Jaint Debtors)  See Exhibit to prope 2 of link form.  Corporation (includes LLC and LLP)  Partnership  Other (If debtor is not one of the above entities, check this box and state type of entity below.)  Debtor is a tas excernpt organization under Title 26 of the United States Code (the Internal Revenue Code).  Filing Fee (Check one box)  Filing Fee tatached  Filing Fee tatached  Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration. See Official Form 3.  A plan is being filed with this petition  A personal, family, or house-hold purpose.  Check one box:  A plan is being filed with this petition from one or more classes creditors, in accordance with 11 U.S.C. § 101(51D).  Check its a small business debtor as defined in 11 U.S.C. § 101(51D).  Check its a small business debtor as defined in 11 U.S.C. § 101(51D).  Check its a small business debtor as defined in 11 U.S.C. § 101(51D).  Check its a small business debtor as defined in 11 U.S.C. § 101(51D).  Check its a small b  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                     |                                                                                                                                        |                              |                                                                                   |                                                                                                                                                            |
| Assex Lindenwood Northbrook, IL  ZIPCODE 60062  County of Residence or of the Principal Place of Business: Cook  Mailing Address of Debtor (if different from street address)  Mailing Address of Debtor (if different from street address)  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address)  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address)  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address)  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address)  ZIPCODE  Location of Principal Assets of Business Debtor (if different from street address)  [Check one box.)    Health Care Business (Check one box.)   Health Care Business (Check one box.)   Ghapter of Busineyutcy Code Under Which the Petition is Filed (Check one box.)   Chapter 15 Petition for Chapter 15 Petition for Chapter 15 Petition for Single Asset Real Estate as defined in 11  U.S.C. § 101(51B)   Bailroad   Slockbowled Polymore (Check one box.)   Chapter (If debtor is not one of the above entities, check this box and state type of entity below.)   Debtor is a tax-exempt cognization under Title 2 for the United States Code (the Internal Revenue Code).   Tax-Exempt Entity (Check box., if applicable.)   Debtor is a tax-exempt organization under Title 2 for the United States Code (the Internal Revenue Code).   Filing Fee (Check one box.)   Filing Fee waiver requested (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1000(b). See Official Form 3B.   Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business de  |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                     |                                                                                                                                        |                              |                                                                                   |                                                                                                                                                            |
| County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business:   County of Residence or of the Principal Place of Business and Place of Bu    | 4568 Lindenwood<br>Northbrook, IL                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                     | Street Address of Jo                                                                                                                   | oint Debtor (No. & Street,   | City, State                                                                       | e & Zip Code):                                                                                                                                             |
| Mailing Address of Debtor (if different from street address)    Mailing Address of Joint Debtor (if different from street address):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                     |                                                                                                                                        |                              | Z                                                                                 | IPCODE                                                                                                                                                     |
| Location of Principal Assets of Business Debtor (if different from street address above):    Type of Debtor (Form of Organization) (Check one box.)   Health Care Business (Check one box.)   Health Care Business (Check one box.)   Chapter of Bankruptey Code Under Which the Petition is Filed (Check one box.)   Chapter of Busines Filed (Check one box.)   Chapter of Busines Filed (Check one box.)   Chapter of Busines Filed (Check one box.)   Chapter of Section of a Foreign of the Check one box.)   Chapter of Section of a Foreign of a Foreign of the Check one box.)   Chapter of Section of a Foreign of the Check one box.   Chapter of Section of a Foreign of Stockbroker   Commodity Broker   Chapter of Section of a Foreign of Chapter of Section of a Foreign of Chapter of Section of a Foreign of Chapter of Section of Stockbroker   Chapter of Section of Section of Stockbroker   Chapter of Section of Section of Stockbroker   Chapter of Section of  | *                                                                                                                                                                                                                                                                                                                                                                              | ness:                                                                                                                                                               | County of Residence                                                                                                                    | e or of the Principal Place  | of Busine                                                                         | ess:                                                                                                                                                       |
| Location of Principal Assets of Business Debtor (if different from street address above):    Type of Debtor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Mailing Address of Debtor (if different from street ad                                                                                                                                                                                                                                                                                                                         | ldress)                                                                                                                                                             | Mailing Address of                                                                                                                     | Joint Debtor (if different f | from street                                                                       | t address):                                                                                                                                                |
| Type of Debtor (Form of Organization) (Check one box.)   Health Care Business   Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)   Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.)   Chapter 15 Petition for Chapter 15 Petition for Recognition of a Foreign Railroad Stockbroker   Chapter 12   Chapter 15 Petition for Chapter 12   Chapter 15 Petition for Chapter 16 Petition for Recognition of a Foreign Stockbroker   Clearing Bank   Other (If debtor is not one of the above entities, check this box and state type of entity below.)   Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).   Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).   Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).   Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).   Debtor is not a small business d  | Γ                                                                                                                                                                                                                                                                                                                                                                              | ZIPCODE                                                                                                                                                             | 1                                                                                                                                      |                              | Z                                                                                 | IPCODE                                                                                                                                                     |
| Nature of Business (Check one box.)   Health Care Business (Check one box.)   Chapter 15 Petition for Acceptance of the Potrion of Acceptance of Bankruptcy Code Under Which the Potrion is Piled (Check one box.)   Chapter 15 Petition of a Foreign Chapter 19     | Location of Principal Assets of Business Debtor (if di                                                                                                                                                                                                                                                                                                                         | fferent from street address ab                                                                                                                                      | pove):                                                                                                                                 |                              | <u> </u>                                                                          |                                                                                                                                                            |
| (Form of Organization) (Check one box.)   Health Care Business     Single Asset Real Estate as defined in 11     U.S.C. \$ 101(51B)     Partnership   Chapter 9   Recognition of a Foreign     Chapter 19   Recognition of a Foreign     Chapter 19   Recognition of a Foreign     Chapter 19   Recognition of a Foreign     Chapter 11   Main Proceeding     Chapter 12   Chapter 15   Recognition of a Foreign     Chapter 15   Recognition of a Foreign     Chapter 16   Chapter 17   Chapter 17   Chapter 18     Chapter 18   Recognition of a Foreign     Chapter 19   Recognition of a Foreign     Chapter 19   Recognition of a Foreign     Chapter 19   Chapter 15   Recognition of a Foreign     Nonmain Proceeding     Chapter 11   Main Proceeding     Chapter 11   Recognition of a Foreign     Nonmain Proceeding     Chapter 11   Lys.C.     Debts are primarily consumer     debts, defined in 11 U.S.C.     1 U.S.C.   101(51B)     Debts are primarily consumer     debts, defined in 11 U.S.C.     1 1 U.S.C.   101(8) as "incurred by an individual primarily for a personal, family, or house-hold purpose."   Full Filing Fee (Check one box:     Filing Fee (Check one box:     Debtor is a small business debtor as defined in 11 U.S.C.     Debtor is a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor as defined in 11 U.S.C.     Debtor is not a small business debtor a |                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                     |                                                                                                                                        |                              | Z                                                                                 | IPCODE                                                                                                                                                     |
| Full Filing Fee attached  ☐ Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  ☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  ☐ Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  ☐ Check if:  ☐ Debtor's aggregate noncontingent liquidated debts owed to non-insiders or affiliates are less than \$2,190,000.  Check all applicable boxes:  ☐ A plan is being filed with this petition ☐ Acceptances of the plan were solicited prepetition from one or more classes creditors, in accordance with 11 U.S.C. § 1126(b).  Statistical/Administrative Information ☐ Debtor estimates that funds will be available for distribution to unsecured creditors.  ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | (Form of Organization) (Check one box.)  ✓ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP)  ☐ Partnership  ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)                                                                                                | (Check one  Health Care Business Single Asset Real Estat U.S.C. § 101(51B) Railroad Stockbroker Commodity Broker Clearing Bank Other  Tax-Exempt (Check box, if a   | t Entity applicable.) organization under States Code (the                                                                              | the Petition i               | Chapt Recog Main Chapt Recog Nonm Ature of D Consumer U.S.C. I by an for a nouse- | check one box.)  ter 15 Petition for gnition of a Foreign  Proceeding ter 15 Petition for gnition of a Foreign anin Proceeding  Debts  Debts are primarily |
| Estimated Number of Creditors                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ☐ Filing Fee to be paid in installments (Applicable to attach signed application for the court's considerati is unable to pay fee except in installments. Rule 10 3A.  ☐ Filing Fee waiver requested (Applicable to chapter attach signed application for the court's consideration.  ☐ Debtor estimates that funds will be available for destribution to unsecured creditors. | Debtor is a small Debtor is not a si Check if: Debtor's aggrega affiliates are less Check all applicabl A plan is being f Acceptances of ti creditors, in accounts. | the noncontingent liquidated than \$2,190,000.  Le boxes:  A with this petition the plan were solicited prepardance with 11 U.S.C. § 1 | d debts ov                   | U.S.C. § 101(51D).                                                                |                                                                                                                                                            |

25,000

to \$50 million \$100 million

50,000

\$50,000,001 to \$100,000,001

100,000

to \$500 million to \$1 billion

to \$500 million to \$1 billion

\$500,000,001 More than

\$500,000,001 More than

100,000

\$1 billion

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\$500,000

▼ □ □ □ □ □ □ □ \$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001

\$1 million

5,000

\$10 million

10,000

\$1 million \$10 million to \$50 million \$100 million

\$50,001 to \$100,001 to \$500,001 to \$1,000,001 to \$10,000,001 \$50,000,001 to \$100,000,001

Estimated Assets

\$0 to

\$0 to

 $\checkmark$ 

\$50,000 \$100,000

Estimated Liabilities

 $\checkmark$ 

| Where Filed: <b>None</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Location Where Filed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Case Number:                                                                                                                                                                                     | Date Filed:                                                                                                                                                                                                                                                                 |
| Pending Bankruptcy Case Filed by any Spouse, Partner or                                                                                                                                                                                                                                                                                                                                                                                                                                              | Affiliate of this Debtor (If m                                                                                                                                                                   | nore than one, attach additional sheet)                                                                                                                                                                                                                                     |
| Name of Debtor: None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Case Number:                                                                                                                                                                                     | Date Filed:                                                                                                                                                                                                                                                                 |
| District:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Relationship:                                                                                                                                                                                    | Judge:                                                                                                                                                                                                                                                                      |
| Exhibit A  To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  Exhibit A is attached and made a part of this petition.                                                                                                                                                                          | (To be complete whose debts are a lift of the petitioner that I have informed the petitioner chapter 7, 11, 12, or 13 of the explained the relief available to                                   | Exhibit B d if debtor is an individual primarily consumer debts.) r named in the foregoing petition, declar oner that [he or she] may proceed unde title 11, United States Code, and have under each such chapter. I further certify the notice required by § 342(b) of the |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | X /s/ Martin Tiersky                                                                                                                                                                             | 2/10/08                                                                                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Signature of Attorney for Debtor(s)                                                                                                                                                              |                                                                                                                                                                                                                                                                             |
| Exhibit D completed and signed by the debtor is attached and man                                                                                                                                                                                                                                                                                                                                                                                                                                     | ch spouse must complete and at                                                                                                                                                                   | tach a separate Exhibit D.)                                                                                                                                                                                                                                                 |
| If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached.                                                                                                                                                                                                                                                                                                                                                                                                   | ed a made a part of this petition.                                                                                                                                                               |                                                                                                                                                                                                                                                                             |
| Information Regardin (Check any ap  (Check any ap  Debtor has been domiciled or has had a residence, principal place of preceding the date of this petition or for a longer part of such 180  ☐ There is a bankruptcy case concerning debtor's affiliate, general p  ☐ Debtor is a debtor in a foreign proceeding and has its principal place or has no principal place of business or assets in the United States to in this District, or the interests of the parties will be served in regarding. | plicable box.) of business, or principal assets in a days than in any other District. cartner, or partnership pending in ace of business or principal asset but is a defendant in an action or p | n this District.  Is in the United States in this District, proceeding [in a federal or state court]                                                                                                                                                                        |
| Certification by a Debtor Who Reside (Check all app                                                                                                                                                                                                                                                                                                                                                                                                                                                  | licable boxes.)                                                                                                                                                                                  | -                                                                                                                                                                                                                                                                           |
| ☐ Landlord has a judgment against the debtor for possession of debtor                                                                                                                                                                                                                                                                                                                                                                                                                                | tor's residence. (If box checked,                                                                                                                                                                | complete the following.)                                                                                                                                                                                                                                                    |
| (Name of landlord or lesso                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | or that obtained judgment)                                                                                                                                                                       |                                                                                                                                                                                                                                                                             |
| (Address of lan-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                             |

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
 Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

Case 08-03975 B1 (Official Form 1) (1/08)

filing of the petition.

(This page must be completed and filed in every case)

**Voluntary Petition** 

Location

Doc 1

Filed 02/21/08

Document

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Page 13 of 38
Name of Debtor(s):

Ruby, Brian

Case Number:

Prior Bankruptcy Case Filed Within Last 8 Years (If more than two, attach additional sheet)

Desc Main

Date Filed:

Page 2

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Page 3

(This page must be completed and filed in every case)

Name of Debtor(s): Ruby, Brian

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

Doc 1

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United State Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Brian Ruby
Signature of Debtor

Brian Ruby

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 10, 2008

Date

Χ

#### Signature of Attorney\*

#### X /s/ Martin Tiersky

Signature of Attorney for Debtor(s)

#### Martin Tiersky 2833956

Printed Name of Attorney for Debtor(s)

#### **Martin Tiersky**

Firm Name

#### 4032 Lunt Ave.

Address

Lincolnwood, IL 60712-2328

#### (773) 465-1497

Telephone Number

#### February 10, 2008

Date

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.
- ☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| Signature of Foreign Representative    |  |  |
|----------------------------------------|--|--|
|                                        |  |  |
| Diving CE in Divini                    |  |  |
| Printed Name of Foreign Representative |  |  |

#### **Signature of Non-Attorney Petition Preparer**

I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Date

Social Security Number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

| Address |  |  |  |
|---------|--|--|--|
|         |  |  |  |
|         |  |  |  |
|         |  |  |  |

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

<sup>\*</sup>In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Case 08-03975 Official Form 1, Exhibit D (10/06)

Doc 1

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Document Page 15 of 38 United States Bankruptcy Court

Northern District of Illinois

| IN RE:      |           | Case No.  |
|-------------|-----------|-----------|
| Ruby, Brian |           | Chapter 7 |
| *           | Debtor(s) |           |

#### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

[7] 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in    |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the |
| certificate and a copy of any debt repayment plan developed through the agency.                                                             |
| 2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by   |

| the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in    |
|---------------------------------------------------------------------------------------------------------------------------------------------|
| performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file |
| a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through     |
| the agency no later than 15 days after your bankruptcy case is filed.                                                                       |
| 3 I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five       |

3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed

| uninstea.                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by motion for determination by the court.]                                                     |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);    |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, t participate in a credit counseling briefing in person, by telephone, or through the Internet.); |
| Active military duty in a military combat zone.                                                                                                                                                                                |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(bdoes not apply in this district.                                                            |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | 's/ Brian Ruby |
|----------------------|----------------|
| · ·                  | -              |

Date: February 10, 2008

 $_{B6\,Summary}$  (Case 08-03975 Doc 1

Filed 02/21/08 Entered 02/21/08 15:02:33 Desc Main Document Page 16 of 38 United States Bankruptcy Court

| nited States | Bank     | ruptcy    | Cour |
|--------------|----------|-----------|------|
| Northern I   | District | t of Illi | nois |

| IN RE:      |           | Case No.  |
|-------------|-----------|-----------|
| Ruby, Brian |           | Chapter 7 |
|             | Debtor(s) | •         |

#### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE                                                                   | ATTACHED<br>(YES/NO) | NUMBER OF<br>SHEETS | ASSETS       | LIABILITIES  | OTHER       |
|------------------------------------------------------------------------------------|----------------------|---------------------|--------------|--------------|-------------|
| A - Real Property                                                                  | Yes                  | 1                   | \$ 0.00      |              |             |
| B - Personal Property                                                              | Yes                  | 3                   | \$ 77,214.00 |              |             |
| C - Property Claimed as Exempt                                                     | Yes                  | 1                   |              |              |             |
| D - Creditors Holding Secured Claims                                               | Yes                  | 1                   |              | \$ 0.00      |             |
| E - Creditors Holding Unsecured Priority<br>Claims (Total of Claims on Schedule E) | Yes                  | 1                   |              | \$ 0.00      |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 2                   |              | \$ 54,095.00 |             |
| G - Executory Contracts and Unexpired<br>Leases                                    | Yes                  | 1                   |              |              |             |
| H - Codebtors                                                                      | Yes                  | 1                   |              |              |             |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                   |              |              | \$ 1,352.53 |
| J - Current Expenditures of Individual Debtor(s)                                   | Yes                  | 1                   |              |              | \$ 1,990.00 |
|                                                                                    | TOTAL                | 13                  | \$ 77,214.00 | \$ 54,095.00 |             |

Form 6 - Statistical Summary (12707)5 Doc 1

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| nited States | Banl  | krupt   | cy ( | Court |
|--------------|-------|---------|------|-------|
| Northern D   | ictri | ct of I | llin | nis   |

| IN RE:      |           | Case No   |
|-------------|-----------|-----------|
| Ruby, Brian |           | Chapter 7 |
|             | Debtor(s) | •         |

#### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability                                                                                                   | Amount     |
|---------------------------------------------------------------------------------------------------------------------|------------|
| Domestic Support Obligations (from Schedule E)                                                                      | \$<br>0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)                                          | \$<br>0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$<br>0.00 |
| Student Loan Obligations (from Schedule F)                                                                          | \$<br>0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E                   | \$<br>0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | \$<br>0.00 |
| TOTAL                                                                                                               | \$<br>0.00 |

#### **State the following:**

| Average Income (from Schedule I, Line 16)                                                         | \$<br>1,352.53 |
|---------------------------------------------------------------------------------------------------|----------------|
| Average Expenses (from Schedule J, Line 18)                                                       | \$<br>1,990.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C |                |
| Line 20)                                                                                          | \$<br>462.72   |

#### **State the following:**

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$<br>0.00      |
|----------------------------------------------------------------------------|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$<br>0.00      |
| 4. Total from Schedule F                                                   |         | \$<br>54,095.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$<br>54,095.00 |

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|                                  |       |                |                           |           |

IN RE Ruby, Brian

Debtor(s)

Case No. \_\_\_\_\_\_\_

(If known)

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION | AMOUNT OF SECURED<br>CLAIM |
|--------------------------------------|--------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|----------------------------|
| None                                 |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |
|                                      |                                            |                                       |                                                                                                                |                            |

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TOTAL 0.00 (Report also on Summary of Schedules)

| B6B (Official Form SB) | Q <u>8</u> ₀93975 |
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(If known)

IN RE Ruby, Brian

Debtor(s)

Case No. \_

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | TYPE OF PROPERTY                                                                                                                                                                                                                              | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY                                                      | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|
|     | Cash on hand.                                                                                                                                                                                                                                 | X                | shocking account at Chaca Pank                                                            |                                       | 200.00                                                                                                         |
| 2.  | Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                      |                  | checking account at Chase Bank                                                            |                                       | 200.00                                                                                                         |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.                                                                                                                                                          | X                |                                                                                           |                                       |                                                                                                                |
| 4.  | Household goods and furnishings, include audio, video, and computer equipment.                                                                                                                                                                |                  | Dell laptop computer                                                                      |                                       | 300.00                                                                                                         |
| 5.  | Books, pictures and other art objects,<br>antiques, stamp, coin, record, tape,<br>compact disc, and other collections or<br>collectibles.                                                                                                     | X                |                                                                                           |                                       |                                                                                                                |
| 6.  | Wearing apparel.                                                                                                                                                                                                                              | X                |                                                                                           |                                       |                                                                                                                |
| 7.  | Furs and jewelry.                                                                                                                                                                                                                             | X                |                                                                                           |                                       |                                                                                                                |
| 8.  | Firearms and sports, photographic, and other hobby equipment.                                                                                                                                                                                 | X                |                                                                                           |                                       |                                                                                                                |
| 9.  | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.                                                                                                                          |                  | \$250,000 life insurance policy with Met Life. Beneficiary, Margaret Ruby, former spouse. |                                       | 3,814.00                                                                                                       |
| 10. | Annuities. Itemize and name each issue.                                                                                                                                                                                                       | X                |                                                                                           |                                       |                                                                                                                |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X                |                                                                                           |                                       |                                                                                                                |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.                                                                                                                                                   |                  | 401(k) account IRA at TD Waterhouse                                                       |                                       | 65,000.00<br>2,400.00                                                                                          |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.                                                                                                                                                                   |                  | 100% stock of Magab, Inc.                                                                 |                                       | 0.00                                                                                                           |
| 14. | Interests in partnerships or joint ventures. Itemize.                                                                                                                                                                                         | X                |                                                                                           |                                       |                                                                                                                |
|     |                                                                                                                                                                                                                                               |                  |                                                                                           |                                       |                                                                                                                |

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(If known)

IN RE Ruby, Brian

Debtor(s)

\_ Case No. \_\_

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |                                                                                                                                                                                                                                                                                         |                  |                                      |                                       | ,                                                                                                              |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|
|     | TYPE OF PROPERTY                                                                                                                                                                                                                                                                        | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments.                                                                                                                                                                                                     | X                |                                      |                                       |                                                                                                                |
| 16. | Accounts receivable.                                                                                                                                                                                                                                                                    | X                |                                      |                                       |                                                                                                                |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars.                                                                                                                                                                    | X                |                                      |                                       |                                                                                                                |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.                                                                                                                                                                                                          | X                |                                      |                                       |                                                                                                                |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.                                                                                                                       | X                |                                      |                                       |                                                                                                                |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.                                                                                                                                                                    | X                |                                      |                                       |                                                                                                                |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.                                                                                                                | X                |                                      |                                       |                                                                                                                |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.                                                                                                                                                                                                                 | X                |                                      |                                       |                                                                                                                |
|     | Licenses, franchises, and other general intangibles. Give particulars.                                                                                                                                                                                                                  | X                |                                      |                                       |                                                                                                                |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |                                       |                                                                                                                |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.                                                                                                                                                                                                                      |                  | 2002 Mazda Protege auto              |                                       | 5,500.00                                                                                                       |
| 26. | Boats, motors, and accessories.                                                                                                                                                                                                                                                         | X                |                                      |                                       |                                                                                                                |
|     | Aircraft and accessories.                                                                                                                                                                                                                                                               | X                |                                      |                                       |                                                                                                                |
| 28. | Office equipment, furnishings, and supplies.                                                                                                                                                                                                                                            | X                |                                      |                                       |                                                                                                                |
| 29. | Machinery, fixtures, equipment, and supplies used in business.                                                                                                                                                                                                                          | X                |                                      |                                       |                                                                                                                |
| 30. | Inventory.                                                                                                                                                                                                                                                                              | X                |                                      |                                       |                                                                                                                |
| 31. | Animals.                                                                                                                                                                                                                                                                                | X                |                                      |                                       |                                                                                                                |
| 32. | Crops - growing or harvested. Give particulars.                                                                                                                                                                                                                                         | X                |                                      |                                       |                                                                                                                |
|     |                                                                                                                                                                                                                                                                                         |                  |                                      |                                       |                                                                                                                |
|     |                                                                                                                                                                                                                                                                                         |                  |                                      |                                       |                                                                                                                |

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IN RE Ruby, Brian

Debtor(s)

Case No.

Desc Main

(If known)

#### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| TYPE OF PROPERTY                                                                                                                       | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST IN<br>PROPERTY WITHOUT<br>DEDUCTING ANY<br>SECURED CLAIM OR<br>EXEMPTION |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------|------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------|--|--|--|--|
| 33. Farming equipment and implements.                                                                                                  | Х                |                                      |                                       |                                                                                                                |  |  |  |  |
| 34. Farm supplies, chemicals, and feed.                                                                                                | X                |                                      |                                       |                                                                                                                |  |  |  |  |
| <ul><li>34. Farm supplies, chemicals, and feed.</li><li>35. Other personal property of any kind not already listed. Itemize.</li></ul> | X                |                                      |                                       |                                                                                                                |  |  |  |  |
| TOTAL                                                                                                                                  |                  |                                      |                                       |                                                                                                                |  |  |  |  |

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(If known)

IN RE Ruby, Brian

Debtor(s)

Case No. \_

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under:  $(Check\ one\ box)$ 

☐ Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| DESCRIPTION OF PROPERTY                                                                         | SPECIFY LAW PROVIDING EACH EXEMPTION             | VALUE OF CLAIMED<br>EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------|--------------------------------------------------------|
| SCHEDULE B - PERSONAL PROPERTY                                                                  |                                                  |                               |                                                        |
| checking account at Chase Bank                                                                  | 735 ILCS 5 §12-1001(b)                           | 200.00                        | 200.00                                                 |
| Dell laptop computer                                                                            | 735 ILCS 5 §12-1001(b)                           | 300.00                        | 300.00                                                 |
| \$250,000 life insurance policy with Met<br>Life. Beneficiary, Margaret Ruby, former<br>spouse. | 735 ILCS 5 §12-1001(h)(3)                        | 3,814.00                      | 3,814.00                                               |
| 401(k) account                                                                                  | 40 ILCS 5 §§22-230, 4-135, 6-213, 19-117         | 65,000.00                     | 65,000.00                                              |
| IRA at TD Waterhouse                                                                            | 735 ILCS 5 §12-1006(a)                           | 2,400.00                      | 2,400.00                                               |
| 2002 Mazda Protege auto                                                                         | 735 ILCS 5 §12-1001(c)<br>735 ILCS 5 §12-1001(b) | 2,400.00<br>3,100.00          | 5,500.00                                               |
|                                                                                                 |                                                  |                               |                                                        |
|                                                                                                 |                                                  |                               |                                                        |
|                                                                                                 |                                                  |                               |                                                        |

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IN RE Ruby, Brian Case No.

Debtor(s)

(If known)

Desc Main

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| Value \$  Continuation sheets attached  Value \$  Subtotal (Total of this page) Total (Use only on last page)  (Report also on Statistical Summary of Schedules.)  (Report also on Statistical Summary of Schedules.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                        |          |                                       |                                              |            |              |          |                                        |                     |
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| ACCOUNT NO.  ACCOUNT NO.  Value S  Valu                                                                                                                                                                                                                                  | INCLUDING ZIP CODE AND ACCOUNT NUMBER. | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | NATURE OF LIEN, AND DESCRIPTION AND VALUE OF | CONTINGENT | UNLIQUIDATED | DISPUTED | CLAIM WITHOUT<br>DEDUCTING<br>VALUE OF |                     |
| ACCOUNT NO.  ACCOUNT NO.  Value \$  Valu  | ACCOUNT NO.                            |          |                                       |                                              |            |              |          |                                        |                     |
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IN RE Ruby, Brian

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Debtor(s)

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(If known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Stati | isuca Summary of Certain Labinities and Related Data.                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |
|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|
| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data.        |  |  |  |  |  |  |  |
| V     | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |
| TY    | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |
|       | Domestic Support Obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).                                                                               |  |  |  |  |  |  |  |
|       | Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).                                                                                                                                                          |  |  |  |  |  |  |  |
|       | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |  |  |  |  |  |  |  |
|       | Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).                                                                                                                                             |  |  |  |  |  |  |  |
|       | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |
|       | <b>Deposits by individuals</b> Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).                                                                                                                                                                                     |  |  |  |  |  |  |  |
|       | Taxes and Certain Other Debts Owed to Governmental Units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |
|       | Commitments to Maintain the Capital of an Insured Depository Institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).                                                  |  |  |  |  |  |  |  |
|       | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).                                                                                                                                                           |  |  |  |  |  |  |  |
|       | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.                                                                                                                                                                                                                                                                          |  |  |  |  |  |  |  |
|       | O continuation sheets attached                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |  |  |  |

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IN RE Ruby, Brian

Document Page 25 of 38

Case No.

Debtor(s)

(If known)

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

|                                                                                                          | _        |                                       |                                                                                                                                                                   |               |              | _        |                       |
|----------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE                                                                | CONTINGENT    | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. 4753                                                                                         |          |                                       | Revolving account opened 7/05                                                                                                                                     | П             |              | T        |                       |
| Bank Of America<br>Po Box 1598<br>Norfolk, VA 23501                                                      | -        |                                       |                                                                                                                                                                   |               |              |          | 8,485.00              |
| ACCOUNT NO. <b>414709171198</b>                                                                          | 1        |                                       | Open account opened 4/00                                                                                                                                          | П             | 1            | $\top$   | ·                     |
| Capital 1 Bk<br>I1013 W Broad St<br>Glen Allen, VA 23060                                                 |          |                                       |                                                                                                                                                                   |               |              |          |                       |
| ACCOUNT NO. <b>441712153643</b>                                                                          | _        |                                       | Revolving account opened 12/99                                                                                                                                    |               | _            | +        | 214.00                |
| Chase<br>800 Brooksedge Blvd<br>Westerville, OH 43081                                                    | -        |                                       |                                                                                                                                                                   |               |              |          | 35,720.00             |
| ACCOUNT NO. <b>601100741015</b>                                                                          |          |                                       | Revolving account opened 8/97                                                                                                                                     | П             | T            | 十        |                       |
| Discover Fin<br>Pob 15316<br>Wilmington, DE 19850                                                        | -        |                                       |                                                                                                                                                                   |               |              |          | 7,317.00              |
| 1                                                                                                        |          |                                       |                                                                                                                                                                   | Subt          |              | - 1      |                       |
| 1 continuation sheets attached                                                                           |          |                                       | (Total of th                                                                                                                                                      |               | age)<br>ota  |          | 51,736.00             |
|                                                                                                          |          |                                       | (Use only on last page of the completed Schedule F. Report<br>the Summary of Schedules and, if applicable, on the St<br>Summary of Certain Liabilities and Relate | also<br>atist | o or<br>tica | n<br>ll  | \$                    |

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Case No.

Desc Main

IN RE Ruby, Brian

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Debtor(s)

(If known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|                                                                                                             |          | (1                                    | Continuation Sneet)                                                                                                                                             |                |              |          |                       |
|-------------------------------------------------------------------------------------------------------------|----------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS<br>INCLUDING ZIP CODE, AND ACCOUNT NUMBER.<br>(See Instructions Above.)    | CODEBTOR | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM IS<br>SUBJECT TO SETOFF, SO STATE                                                              | CONTINGENT     | UNLIQUIDATED | DISPUTED | AMOUNT<br>OF<br>CLAIM |
| ACCOUNT NO. <b>045752238152</b>                                                                             |          |                                       | Revolving account opened 9/06                                                                                                                                   | T              |              | П        |                       |
| Kohls/chase<br>N56 W 17000 Ridgewood Dr<br>Menomonee Falls, WI 53051                                        |          |                                       |                                                                                                                                                                 |                |              |          | 263.00                |
| ACCOUNT NO. <b>01</b>                                                                                       |          |                                       | Revolving account opened 3/07                                                                                                                                   | +              |              | Н        | 200:00                |
| Monogram Bank N America<br>4060 Ogletown/stan De5-019-03-07<br>Newark, DE 19713                             |          |                                       | neverving account opened over                                                                                                                                   |                |              |          | 694.00                |
| ACCOUNT NO. <b>6011549105555726</b>                                                                         |          |                                       | Revolving account opened 12/06                                                                                                                                  | +              |              | Н        | 094.00                |
| Ntb/cbsd<br>Po Box 6003<br>Hagerstown, MD 21747                                                             |          |                                       | November 1200                                                                                                                                                   |                |              |          | 418.00                |
| ACCOUNT NO. <b>104160711661131</b>                                                                          |          |                                       | Installment account opened 4/07                                                                                                                                 | H              |              | Н        | 410.00                |
| Wffinance<br>316 W Army Trail Rd Ste<br>Bloomingdale, IL 60108                                              |          |                                       | <b>F</b>                                                                                                                                                        |                |              |          | 984.00                |
| ACCOUNT NO.                                                                                                 |          |                                       |                                                                                                                                                                 |                |              |          |                       |
| ACCOUNT NO.                                                                                                 |          |                                       |                                                                                                                                                                 |                |              |          |                       |
|                                                                                                             |          |                                       |                                                                                                                                                                 |                |              |          |                       |
| ACCOUNT NO.                                                                                                 |          |                                       |                                                                                                                                                                 |                |              |          |                       |
|                                                                                                             |          |                                       |                                                                                                                                                                 |                |              |          |                       |
| Sheet no. 1 of 1 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | -        |                                       | (Total of the                                                                                                                                                   |                | age          | ;)       | \$ 2,359.00           |
|                                                                                                             |          |                                       | (Use only on last page of the completed Schedule F. Repor<br>the Summary of Schedules, and if applicable, on the S<br>Summary of Certain Liabilities and Relate | t als<br>tatis | tica         | n<br>al  | \$ <b>54,095.00</b>   |

| R6G (Official CASE 08703975 | Doc 1 | Filed 02/21/08 | Entered 02/21/08 15:02:33 | Desc Main |
|-----------------------------|-------|----------------|---------------------------|-----------|
|                             |       | Document       | Page 27 of 38             |           |
| IN RE Ruby, Brian           |       |                | Case No                   |           |

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(If known)

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

Debtor(s)

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE<br>OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
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|--------------------------------|-------|----------------|--------------------------|--------------|
| IN RE Ruby, Brian              |       | Document       | Page 28 of 38  Case No.  |              |
|                                |       | Debtor(s)      |                          | (If known)   |

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
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IN RE Ruby, Brian

Debtor(s)

Doc 1

Case No. \_\_\_\_\_(If known)

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status                                   |                                                             | DEPENDENTS OF DEBTOR AND SPOUSE                                        |               |       |          |                    |          |
|-----------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------------|---------------|-------|----------|--------------------|----------|
| Single                                                    |                                                             | RELATIONSHIP(S): Son Daughter                                          |               |       |          | AGE(S):<br>12<br>9 |          |
| EMBLOVMENT.                                               |                                                             | DERTOR                                                                 |               |       | aboriae  |                    |          |
| EMPLOYMENT:                                               |                                                             | DEBTOR                                                                 |               |       | SPOUSE   |                    |          |
| Name of Employer How long employed Address of Employer Po | ales<br>acy's North<br>months<br>O Box 1548<br>orthbrook, I |                                                                        |               |       |          |                    |          |
| INCOME: (Estimate                                         | of average of                                               | projected monthly income at time case filed)                           |               |       | DEBTOR   |                    | SPOUSE   |
|                                                           | _                                                           | lary, and commissions (prorate if not paid mor                         | uthly)        | \$    | 1,598.70 |                    | SI OUSL  |
| 2. Estimated monthly of                                   |                                                             | rary, and commissions (prorate if not paid mor                         | idily)        | \$    | 1,330.70 | \$                 |          |
| 3. SUBTOTAL                                               | , , 01 111110                                               |                                                                        |               | \$    | 1,598.70 | \$                 |          |
| 4. LESS PAYROLL D                                         | FDUCTION                                                    | IS                                                                     |               | Ψ     | 1,330.70 | Ψ                  |          |
| a. Payroll taxes and S                                    |                                                             |                                                                        |               | \$    | 246.17   | \$                 |          |
| b. Insurance                                              | ocial occar                                                 | ,                                                                      |               | \$    |          | \$                 |          |
| c. Union dues                                             |                                                             |                                                                        |               | \$    |          | \$                 |          |
| d. Other (specify)                                        |                                                             |                                                                        |               | \$    |          | \$                 |          |
| -                                                         |                                                             |                                                                        |               | \$    |          | \$                 |          |
| 5. SUBTOTAL OF P.                                         | AYROLL D                                                    | DEDUCTIONS                                                             |               | \$    | 246.17   | \$                 |          |
| 6. TOTAL NET MO                                           | NTHLY TA                                                    | KE HOME PAY                                                            |               | \$    | 1,352.53 | \$                 |          |
| 7. Regular income from                                    | n operation o                                               | of business or profession or farm (attach detaile                      | ed statement) | \$    |          | \$                 |          |
| 8. Income from real pr                                    |                                                             |                                                                        |               | \$    |          | \$                 |          |
| 9. Interest and dividen                                   |                                                             |                                                                        |               | \$    |          | \$                 |          |
|                                                           |                                                             | ort payments payable to the debtor for the debt                        | or's use or   |       |          |                    |          |
| that of dependents liste                                  |                                                             |                                                                        |               | \$    |          | \$                 |          |
| 11. Social Security or                                    |                                                             |                                                                        |               | ¢     |          | ¢                  |          |
| (Specify)                                                 |                                                             |                                                                        |               | \$ —— |          | \$                 |          |
| 12. Pension or retireme                                   | ent income                                                  |                                                                        |               | \$    |          | \$                 |          |
| 13. Other monthly inco                                    |                                                             |                                                                        |               | -     |          | ·                  |          |
| (Specify)                                                 |                                                             |                                                                        |               | \$    |          | \$                 |          |
|                                                           |                                                             |                                                                        |               | \$    |          | \$                 |          |
|                                                           |                                                             |                                                                        |               | . \$  |          | \$                 |          |
| 14. SUBTOTAL OF 1                                         | LINES 7 TH                                                  | IROUGH 13                                                              |               | \$    |          | \$                 |          |
|                                                           |                                                             | <b>COME</b> (Add amounts shown on lines 6 and 14)                      | )             | \$    | 1,352.53 | \$                 |          |
|                                                           |                                                             | The same shows of the Try                                              |               |       | .,       | т                  |          |
|                                                           |                                                             | <b>ONTHLY INCOME</b> : (Combine column totals tal reported on line 15) | from line 15; |       | \$       | 1,352.53           | <u> </u> |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

(If known)

IN RE Ruby, Brian

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Debtor(s)

\_ Case No. \_

| SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | $(\mathbf{S})$ |               |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---------------|
| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the decor Form22A or 22C.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |               |
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete expenditures labeled "Spouse."                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | a separate     | e schedule of |
| . Rent or home mortgage payment (include lot rented for mobile home)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$             |               |
| a. Are real estate taxes included? Yes No ✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | · —            |               |
| b. Is property insurance included? Yes No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |               |
| 2. Utilities:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |               |
| a. Electricity and heating fuel                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$             |               |
| b. Water and sewer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$             |               |
| c. Telephone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | \$             | 90.00         |
| d. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$             |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$             |               |
| 3. Home maintenance (repairs and upkeep)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$             |               |
| I. Food                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | \$             | 400.00        |
| 5. Clothing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$             | 300.00        |
| 5. Laundry and dry cleaning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$             |               |
| 7. Medical and dental expenses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | \$             | 250.00        |
| B. Transportation (not including car payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | \$             | 200.00        |
| P. Recreation, clubs and entertainment, newspapers, magazines, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$             |               |
| 0. Charitable contributions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$             |               |
| 1. Insurance (not deducted from wages or included in home mortgage payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |               |
| a. Homeowner's or renter's                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$             |               |
| b. Life                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | \$             |               |
| c. Health                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$             |               |
| d. Auto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | \$             |               |
| e. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$             |               |
| 2 m ( 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$             |               |
| 2. Taxes (not deducted from wages or included in home mortgage payments)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ф              |               |
| (Specify)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | — \$ —         |               |
| 2 Installation to the control of the standard 11 12 and 12 area of the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard to the standard | — » —          |               |
| 3. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan) a. Auto                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ¢              |               |
| b. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ф —            |               |
| b. Office                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | — ¢ —          |               |
| 4. Alimony, maintenance, and support paid to others                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | \$             | 750.00        |
| 5. Payments for support of additional dependents not living at your home                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$             | 7 30.00       |
| 6. Regular expenses from operation of business, profession, or farm (attach detailed statement)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |               |
| 7. Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$ —           |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$             |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$             |               |
| <b>18. AVERAGE MONTHLY EXPENSES</b> (Total lines 1-17. Report also on Summary of Schedules and, if                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |               |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | \$             | 1,990.00      |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the filing o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | f this docu    | ment:         |

#### 20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$ 1,352.53 |
|------------------------------------------------------|-------------|
| b. Average monthly expenses from Line 18 above       | \$1,990.00  |
| c. Monthly net income (a. minus b.)                  | \$ -637.47  |

IN RE Ruby, Brian

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Case No.

Debtor(s)

(If known)

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 15 sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: February 10, 2008 Signature: /s/ Brian Ruby Debtor **Brian Ruby** Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_\_ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature: (Print or type name of individual signing on behalf of debtor)

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

 $_{B7}$  (Official Form )  $_{B7}$  (Official Form )  $_{B7}$  (Official Form )  $_{B7}$ Doc 1

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Document Page 32 of 38 **United States Bankruptcy Court** 

Northern District of Illinois

| IN RE:      |           | Case No.  |
|-------------|-----------|-----------|
| Ruby, Brian |           | Chapter 7 |
|             | Debtor(s) | 1         |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE 2.020.00 Macv's North 2007-\$3,357 2006-\$21.979

#### 2. Income other than from employment or operation of business

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

12.566.00 2006 interest \$26: dividends \$190: unemployment compensation \$12.350

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

is filed, unless the spouses are separated and a joint petition is not filed.)

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 6. Assignments and receiverships

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case.  $\checkmark$ (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and joint petition is not filed.)

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 7. Gifts

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 8. Losses

None List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

#### 10. Other transfers

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Sam Oh C/O Won Sun Kim, Atty.

DATE 8/8/07 DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED business operated by Magab, Inc. n/o Chill Bubble Tea. Net proceeds, \$8,255.44.

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Business was owned by Magab, Inc. Debtor owned 100% of stock of Magab.

Margaret Ruby 1232 Honeyhill Rd Addison, IL 60101 spouse c. 12/20/06 1232 Honeyhill Rd

Marital home transferred pursuant to judgment for dissolution of marriage entered December 20, 2006.

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

#### 11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TD Waterhouse

TYPE AND NUMBER OF ACCOUNT AMOUNT AND DATE OF SALE AND AMOUNT OF FINAL BALANCE OR CLOSING

securities

#### 12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

 $\checkmark$ 

#### 15. Prior address of debtor

None If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 1232 Honeyhill Rd, Addison, IL NAME USED

DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

#### 17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

 $\checkmark$ 

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

#### 18. Nature, location and name of business

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER **INDIVIDUAL** TAXPAYER-I.D. NO. (ITIN)/COMPLETE EIN

NAME Magab, Inc. **ADDRESS** 6317 Dempster Morton Grove, IL 60053 NATURE OF **BEGINNING AND** BUSINESS **ENDING DATES** 

Chill Bubble Tea 8/06--8/07

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

 $\checkmark$ 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account  $\checkmark$ and records, or prepared a financial statement of the debtor.

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of the case by the debtor.

|        | Case 08-03975 I                                                             | Doc 1 Filed 02/21/08 Document     | 8 Entered 02/21/08 15:02:33<br>Page 36 of 38                                                               | Desc Main                            |
|--------|-----------------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------------------------------|--------------------------------------|
| 20. Iı | nventories                                                                  | 2000                              | - 1 ago 00 0. 00                                                                                           |                                      |
| None   | a. List the dates of the last two inv<br>dollar amount and basis of each in |                                   | , the name of the person who supervised the ta                                                             | king of each inventory, and the      |
| None   | b. List the name and address of the                                         | e person having possession of the | he records of each of the two inventories report                                                           | ted in a., above.                    |
| 21. C  | Current Partners, Officers, Directo                                         | ors and Shareholders              |                                                                                                            |                                      |
| None   | a. If the debtor is a partnership, lis                                      | st the nature and percentage of p | partnership interest of each member of the partnership                                                     | nership.                             |
| None   | b. If the debtor is a corporation, list or holds 5 percent or more of the v |                                   | ne corporation, and each stockholder who directed corporation.                                             | tly or indirectly owns, controls     |
| 22. F  | ormer partners, officers, directors                                         | s and shareholders                |                                                                                                            |                                      |
| None   | a. If the debtor is a partnership, list of this case.                       | t each member who withdrew fro    | om the partnership within <b>one year</b> immediately                                                      | y preceding the commencemen          |
| None   | b. If the debtor is a corporation, le preceding the commencement of the     |                                   | ose relationship with the corporation terminated                                                           | d within <b>one year</b> immediately |
| 23. V  | Vithdrawals from a partnership or                                           | r distributions by a corporatio   | on                                                                                                         |                                      |
| None   |                                                                             |                                   | listributions credited or given to an insider, incluer perquisite during <b>one year</b> immediately prece |                                      |
| 24. T  | ax Consolidation Group                                                      |                                   |                                                                                                            |                                      |
| None   |                                                                             |                                   | entification number of the parent corporation of<br>hin six years immediately preceding the comme          |                                      |
| 25. P  | ension Funds.                                                               |                                   |                                                                                                            |                                      |
| None   |                                                                             |                                   | identification number of any pension fund to we immediately preceding the commencement of                  |                                      |
| [If co | ompleted by an individual or ind                                            | lividual and spouse]              |                                                                                                            |                                      |
|        | lare under penalty of perjury that<br>to and that they are true and cor     |                                   | ained in the foregoing statement of financia                                                               | al affairs and any attachments       |
| Date   | : February 10, 2008                                                         | Signature /s/ Brian Ru            | by                                                                                                         | Brian Ruby                           |
| Date   | :                                                                           |                                   |                                                                                                            |                                      |

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Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

**0** continuation pages attached

(if any)

# Case 08-03975 Doc 1 Filed 02/21/08 Entered 02/21/08 15:02:33 Desc Main Document Page 37 of 38 United States Bankruptcy Court Northern District of Illinois

IN RE:

Ruby, Brian

Debtor(s)

VERIFICATION OF CREDITOR MATRIX

Number of Creditors \_\_\_\_\_8

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: February 10, 2008

/s/Brian Ruby
Debtor

Joint Debtor

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Ruby, Brian 4568 Lindenwood Northbrook, IL 60062

Martin Tiersky 4032 Lunt Ave. Lincolnwood, IL 60712-2328

Bank Of America Po Box 1598 Norfolk, VA 23501

Capital 1 Bk 11013 W Broad St Glen Allen, VA 23060

Chase 800 Brooksedge Blvd Westerville, OH 43081

Discover Fin Pob 15316 Wilmington, DE 19850

Kohls/chase N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Monogram Bank N America 4060 Ogletown/stan De5-019-03-07 Newark, DE 19713

Ntb/cbsd Po Box 6003 Hagerstown, MD 21747

Wffinance 316 W Army Trail Rd Ste Bloomingdale, IL 60108